

Employee Benefits Division
FY 2002-2003 VISION INSURANCE PREMIUM RATES
(Effective October 2002)

PLAN NAME/CODE	Option	BIWEEKLY			ANNUAL			Monthly (CGIS)		BIWEEKLY									
		Employee	State	Total	Employee	State	Total	Leave/LO	COBRA	Part time employees *1									
	Employee									State									
	(a)									(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
	*2									[(e)/26]	[(f) / 26]	[(b) + (c)]	[(g) -(f)]	[(g) x 95%]	[02-03 rate]	[(g)/12]	[(h)x102%]	[(d) x .5]	[(d) x .5]
VBW0 State Vision Plan (State pays 100%)	1	\$ -	\$ 2.65	\$ 2.65	\$ -	\$ 68.78	\$ 68.78	\$ 5.73	\$ 5.84	\$ 1.32	\$ 1.32								
	2	\$ -	\$ 4.65	\$ 4.65	\$ -	\$ 120.84	\$ 120.84	\$ 10.07	\$ 10.27	\$ 2.32	\$ 2.32								
	3	\$ -	\$ 5.68	\$ 5.68	\$ -	\$ 147.60	\$ 147.60	\$ 12.30	\$ 12.55	\$ 2.84	\$ 2.84								
	4	\$ -	\$ 7.69	\$ 7.69	\$ -	\$ 200.03	\$ 200.03	\$ 16.67	\$ 17.00	\$ 3.85	\$ 3.85								
V3ZN Decline Vision Ins. *3	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)	(n/a)								

*1 Part time employees hired after 1/1/2000 (1/1/2002 for bargaining units A02 & A31) whose regular work schedule is 40 hours or less per biweekly pay period (except bargaining units L32 & T02) pay premiums according to column (j). Other part time employees pay premiums listed in column (b). Permanent intermittent employees are not covered by this provision.

*2 Option 1 = Employee only coverage; Option 2 = Employee & spouse; Option 3 = Employee & Children; Option 4 = Full family.

*3 Decline insurance code V3 is for those employees who have insurance coverage through a State employee or retiree spouse. No rebate is available.